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JASON J YOUNG 3001 W BIG BEAVER ROBECS12T199724 TROY MI 48084-3109

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(Date) DATE MAILED XAMER AND GROUP ART UNIT FILING DATE TOTAL CLAIMS APPLICATION NO. 3304 09/12/97 031 SAGER: 02/22/95 **b**8/392,280 First Named PETER S.

Applicant

WILENS,

TITLE OF HANDHELD GOLF REPORTING AND STATISTICS INVENTION HANDHELD GOLF REPORTING AND STATISTICS

ANALYSIS SYSTEM

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE	
3 PRW-004	473-407.	.000 R!	58 UTI	LITY YES	\$645.00	12/12/9	7
Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the nat attorneys the name member and the name an				g on the patent front page, list s of up to 3 registered patent agents OR, alternatively, (2) a single film (having as a egistered attorney or agent) as of up to 2 registered patent agents. If no name is listed, no printed.	2	C & BASILE,	P. (
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY & STATE OR COUNTRY) Please check the appropriate assignee category indicated below (will not be printed on the patent) individual individual opportunity or other private group entity opportunity.				4a. The following fees are e of Patents and Tradems Lissue Fee Advance Order - # of DEPOSIT ACCOUNT N (ENCLOSE AN EXTRA Lissue Fee Advance Order - # of DEPOSIT ACCOUNT N (ENCLOSE AN EXTRA	arks): If Copies efficiency in these fe NUMBER 25 A COPY OF THIS F	es should be charged to: 5-0115	ner
The COMMISSIONER OF PATENTS	AND TRADEMARKS IS reque	sted to apply the I	ssue Fee to the a	oplication identified above.			
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